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ABSTRACT

The issue presents two articles on emotional disturbances and delinquency. The first, "The Many Faces of Delinquency--An Interview with Dr. Richard L. Jenkins," presents the text of an interview with a psychiatrist who is an author and distinguished expert regarding the therapeutic needs of juvenile delinquents. Aspects covered include etiological variables involved in delinquency, diagnosis, juvenile justice, psychotheray, and educational programs for chronically disruptive youngsters. The second article, "Emotional Disabilities--A Cause without Rebels (An Editorial Comment)" by Carl Smith, bemcans the lack of "militancy" among professionals who work with emotionally disturbed children, and briefly discusses some issues that the author feels must be dealt with. (DLS)

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IOWA PERSPECTIVE

News of Programs for Emotionally Disabled and Chronically Disruptive Students
Iowa Department of Public Instruction October, 1979

The Many Faces of Delinquency: An Interview with Dr. Richard L. Jenkins

When discussing juvenile delinquency or educational programming for the chronically disruptive, we often hear terms such as "group delinquent reactions," "socialized aggressive" or "unsocialized aggressive reaction" tossed out as professional proof that the speaker possesses a depth of knowledge in this field. Some professionals in our state may not, however, realize that one of the originators of these terms, and perhaps the national leader in research and practice regarding the therapeutic needs of juvenile delinquents, is an Iowa psychiatrist by the name of Richard L. Jenkins. Dr. Jenkins is presently living his self-styled life of "retirement" consulting with the Mental Health Institute in Mt. Pleasant and the Training School in Eldora on alternating weeks.

Richard L. Jenkins was born in Brookings, South Dakota on June 3, 1903 to John C. Jenkins and Alice Maud Truman. He later moved and completed his public school work in Los Angeles, California. From high school, Dr. Jenkins went on to Stanford University and completed his B.A. degree with a major in biochemistry in 1925.

From Stanford, Jenkins entered the University of Chicago – Rush Medical College and completed his M.D. degree in 1931. During his first two years at the University of Chicago, Jenkins had some extra course time as the result of his science background from Stanford. During this time he took a course in theory from Professor L. L. Thurstone in the Department of Psychology. Professor Thurstone was one of the pioneers in the use of factor analytical methodology in data analysis. This led to Jenkins' serving as a graduate assistant with Thurstone, culminating in a collaborative publication (Thurstone & Jenkins, "Order of Birth, Parent Age and Intelligence" Behavior Research Monograph, 1931).

Jenkins' work with Professor Thurstone came to a rather abrupt halt in 1930 as the result of financial difficulties at the University of Chicago. From 1931 through 1936, Dr. Jenkins worked as a pediatrician at the Institute for Juvenile Research in Chicago.

In 1936, Jenkins was awarded a Rockefeller Fellowship in Psychiatry and spent 1 1/2 years studying with Dr. Adolph Meyer, a renowned psychiatrist, at John Hopkins Medical Center.

From 1938 through 1949, Jenkins practiced psychiatry in various locations including the New York State Training School for Boys at Warwick, the Michigan Child Guidance Institute at Ann Arbor, the Institute for Juvenile Research in Chicago, and the University of Illinois at Urbana. From

Interview continued on page 3

Emotional Disabilities: A Cause without Rebels (An editorial comment)

Carl R. Smith
Consultant
Emotional Disabilities/Chronically Disruptive

Having tired of addressing such topics as "The Identification of Pupils with Emotional Disabilities," or "The Characteristics of Chronically Disruptive Youth," or "Behavior Disorders in our Classrooms: What is the State of our State?" I decided to begin this fifth volume year of *Iowa Perspective* with something a bit snappier, something aimed at catching the reader's eye, something so seductive that even the most reluctant subscriber would plunge into the first paragraph. So far . . . so good!

After all, the last few months have been so exciting that I deserve the privilege of dealing with a more controversial topic: a March resignation, a May resignation withdrawal, letters to colleagues and relatives explaining my resignation, letters to colleagues and relatives explaining my resignation withdrawal–all of which are, of course, legitimate activities under my job description.

On a more serious level, this title does point at what frustrates me so much as a professional. Our profession, the primary mission of which is to deal with children and young adults who are often in trouble because of their refusal to sit quietly and accept unearned authority, seems, itself, to have

A Cause without Rebels continued on page 2

NOTE: The agenda and pertinent information about the Midwest Conference on Educational Programs for Emotionally Disabled/Chronically Disruptive Students can be found on pages 6 and 7.

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A Cause without Rebels (continued)

trouble influencing authority. Our profession, which often chides our consumers to "get it together," seems to lose professional cohesiveness when our meetings swell to two or more participants. Our profession, which teaches our flock that "reason" and "goodness" will most certainly prevail, must shamefully accept the limitations of our platitudes.

Militancy is a word that seems to carry many negative connotations We remember the militancy on our campuses in the 1960's that led to burned buildings. We remember the militancy in the black movement that, in some cases, erupted in violence. *Webster's New World Dictionary* even begins its definition of a militant as "...at war, fighting." This definition, however, goes on to state, "...ready and willing to fight; esp., vigorous or aggressive in support or promotion of a cause." It is with the latter part of this definition that I chose to deal.

What about quiet, non-violent militancy which equals tenacity in pursuing those goals we know are not only professionally defensible, but legally required? How many kids, who are entitled to a "free appropriate public education," will face exclusion from our state's public schools this year? How many times will we sit passively while a youngster is placed in a less than appropriate special education program? How many parents will be told this year they must meet with the local board of education to explain why their child should be *permitted* to continue in school? How many more parents will be presented with the option of sending their child to a residential treatment center or state hospital when an appropriate program could be provided in the community?

These situations do not occur in all school districts of our state, but they *do* occur. The basis for our hesitancy to act when all available evidence suggests we should, may be similar to what has been described as "decidophobia" by Walter Kaufmann. (From *Decidophobia to Autonomy, Without Guilt and Justice,* Delta, 1973.) Perhaps we are afraid that by taking a more militant professional stand we will be made to look foolish and eventually be considered wrong. But, in an existential sense, isn't it better to have taken a stance and moved for action rather than quivered away for fear of being judged wrong or idealistic?

The pupils for whom we are responsible are likely scapegoats for the ills of our school systems. The latest *Phi Delta Kappan* survey (1979) again names discipline in the schools as the public's number one concern regarding America's schools. Perhaps the simplest solution to this concern is to be rid of those causing the trouble. The vast majority of those behaviors subsumed under the categories of emotional disabilities or chronically disruptive are indeed troublesome for the school system. Who is to protect these pupils from the "knee-jerk" mentality of automatic exclusion? If we don't--who will?

Dr. William C. Rhodes raised many relevant questions in an earlier issue of *Iowa Perspective* ("Beyond Theory and Practice: Implications in Programming for Children with Emotional Disabilities," April 1979) that challenge our tendency to rush to modify deviant populations. And as Dr. Carl Sagen asks in his recently published book, *Broca's Brain* (1979), "...which of the conventional truths of our own age will be considered unforgivable bigotry by the next?"

Perhaps this is where our militancy needs to deal with several issues. We must question whether we are acting as an instrument of society if we move to have a pupil identified as emotionally disabled. We must ask if the behavior is only disturbing to us or whether it is also destructive to the long term adjustment of the pupil. But if we refuse to intervene when it is appropriate, aren't we also acting as an instrument of society? If the school withdraws the opportunity for an individual to complete a functional education, how is this individual left to cope with the world? What does our society offer to the uneducated?

In talking with professional and lay groups throughout our state during the last four years, I have been consistently bombarded with questions such as, "How can I be *sure* a student is emotionally disabled?" "What are the immediate results which can be assured in such programs?" "Are we sure these programs will make a difference?" These are certainly valid areas of inquiry. What I object to is the selective nature with which such criteria seem to be applied. Are these questions being asked in the areas of preschool handicapped or learning disabilities? Are we requiring unequivocal answers before proceeding with program development in these areas? I consider myself an advocate of such empirical questions, but feel that fairness dictates that all areas of education, including general education, must deal with the same questions. As much as I would like to have answers, I don't believe we can wait for definitive answers before developing needed programs and services.

Many of our students seem to emerge, ironically enough, from a powerless background. Somewhere along the way we have acquired the idea that if our schools make any modifications to accommodate a behaviorally deviant student, everyone, most importantly the child and his/her should be grateful and act accordingly. We tend to be angered if parents are so obviously unappreciative as to accuse us of not doing enough. But, in many cases, I don't feel we are doing enough. I make this call for militancy and advocacy to you and to myself. Unlike James Dean in the 1950's movie *Rebel without a Cause*, we have a cause; a cause yet to be fully realized.

IOWA PERSPECTIVE

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1949-1961, Jenkins worked for the Veterans Administration, first as chief of psychiatric research, and then as the director of the Veterans Administration Psychiatric Evaluation Project from 1955 through 1961.

From 1961 through 1971, Jenkins was professor of child psychiatry and chief of the Child Psychiatry Service, Department of Psychiatry, University of Iowa College of Medicine, Iowa City. He has been professor emeritus since 1971, and during this time has engaged in psychiatric consultation of the Mental Health Institute at Mt. Pleasant, Iowa, and the Iowa State Training School for Boys at Eldora, Iowa.

Jenkins is a life fellow of the American Psychiatric Association and the American Orthopsychiatric Association, and a member of the Academy of Child Psychiatry. He has served on the editorial board as an assistant editor of the Journal of the American Orthopsychiatric Association for 18 years and has also served on the board of that association.

Jenkins served a year as chairperson of the Section on Child Psychiatry of the American Psychiatric Association and as chairperson of the Section of Forensic Psychiatry of the American Psychiatric Association. He has also served two terms as a member of the American Psychiatric Association Committee on Nomenclature and Statistics. During his second term on this committee, he was responsible for the Section on Child Psychiatry in the revision of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM-II).

Jenkins has authored two books: Breaking Patterns of Defeat: The Effective Readjustment of the Sick Personality, J. B. Lippincott Co., Philadelphia, 1954; and Behavior Disorders of Childhood and Adolescence, Charles C. Thomas, Springfield, Illinois, 1973. He co-edited a third book, Understanding Disturbed Children, published by Special Child Publications of Seattle, Washington, 1976. Jenkins has also authored or been joint author of approximately 150 articles in scientific and professional journals.

The following is an edited version of interviews conducted by Carl Smith with Dr. Jenkins on March 26, 1979, and April 14, 1979.

Smith: *Looking at your background, it appears that you have chosen to devote most of your professional career to institutionalized youth. This is an area of a low success rate in psychiatry, correct?*

Jenkins: Yes.

Smith: *Why did you choose to go this route? Why did you choose to work with these youngsters as opposed to more middle class clients who might be more motivated to change and subsequently produce a higher "success" rate?*

Jenkins: I chose this professional direction for a variety of reasons. One is my reluctance to charge people for my services which leads families to make financial sacrifices to obtain help for their children. In private practice, with its many expenses, you must charge for your services and exclude those who cannot afford such services. I am not a good bill collector. In the jobs I have had, financial matters have been attended to by others and all I had to worry with was my work. A second important influence on my professional direction was an early publication with Les Hewitt ("Types of Personality Structure Encountered in Child Guidance Clinics," *American Journal of Orthopsychiatry*, 1944) which led to a later monograph published by the state of Illinois (*Fundamental Patterns of Maladjustment: The Dynamics of Their Origin, 1946).* These two publications received quite a bit of attention especially as they related to dealing with the delinquent child.

Smith: *What factors contributed to this attention?*

Jenkins: One had to be that, up to this point, the psychoanalytically oriented psychiatrists had been so ineffective with this population. In fact, many of their techniques were actually destructive with this type of client.

Smith: *Could you give us an example of such "destructive techniques?"*

Jenkins: For example, this was the time of the enthusiasm for play therapy with children. Psychoanalytic thinking at this time stressed the development of self-tolerance, the removal of inhibitions and the encouragement of outpourings of feelings so they could be dealt with. With the pre-delinquent and delinquent child, this is the last thing you want. There is no bottom to the well of hostility within these youngsters and they just get wilder and wilder. What I am speaking of here are the younger children, unsocialized aggressive kids.

Smith: *You are actually trying to put more controls on them.*

Jenkins: You need to put controls on them. What the psychoanalysts had been doing was taking controls away and making the situation worse.

Smith: *This may have been the first time the public had heard of an approach with these youngsters which possessed some element of "common sense."*

Jenkins: Particularly coming from a psychiatrist. And, these are the kids that many private practitioners did not, by and large, want in their offices.

Smith: *Do you still deal today with kids that many private practitioners don't want in their offices?*

Jenkins: Yes, I think that's still true today.

Smith: *At one time there was a fairly popular hypothesis associating such behavior as juvenile delinquency and criminal behavior with the chromosomal makeup of an individual. Were you involved in this area of research?*

Jenkins: I was involved early in my career with research dealing with the etiology of mongolism, referred to now as Downs Syndrome. I was the first person to state its incidence in the general population and came up with an hypothesis about its cause. We recognized that it went back as far as the germ cell and yet was not primarily inherited. This was in the early 1930's and there was already evidence that the incidence increased with maternal age. I established that the incidence increases with maternal age, but not with paternal age except as the two are correlated. I developed a theory that it was due to a loss of vitality in the ovum. It was later found to be due to an extra chromosomne from an imperfect mitosis in the ovum. But, in response to your question, I did not pursue research relating chromosomal structure and delinquency.

Smith: *What do you see as the etiological variables involved in delinquency?*

Jenkins: I was greatly influenced by Clifford Shaw, who was a sociologist working at the Institute for Juvenile Research in Chicago.

Smith: *Didn't Shaw, in his work, find a direct relationship between such deviant behaviors as suicide and delinquency with particular sections of a city, regardless of the ethnic composition of that section?*

Jenkins: Shaw pointed out that delinquency as a gradient was most intense in the center of a city and as you went out from the center, the gradient dropped off. His explanation of juvenile delinquency was that it is a neighborhood phenomenon due to lack of adult direction. Subsequently, as a result of work at the Training School for Boys at Warwick, New York, I recognized two types of juvenile delinquents which Shaw accepted as being representative.

Smith: *What are the two groups you were talking about?*

Jenkins: One was what I called the socialized or group delinquent and the other I referred to as the unsocialized aggressive youth.

Smith: *How did you go about documenting the existence of these types of delinquent kids?*

Jenkins: After returning to Michigan from New York, I had Les Hewitt, who was working on his doctoral dissertation, look for these types of youngsters among referred youngsters to the Child Guidance Clinic in Ann Arbor. To these two groups I added a third group, called the grifter, who was characterized as using craft and deceit in relation to adults. Hewitt easily found the socialized and unsocialized aggressive groups but could not easily identify the third group. Instead, he found a distinct third group which he referred to as withdrawing children and I called the overinhibited child. Our original publication describes these three types of children.

Smith: *This seems to be a more systematic approach to diagnosis. By using a factor-analytical approach you were moving to a more scientific approach to diagnosis. Correct?*

Jenkins: I became imbued with scientific methods primarily under Professor A. J. Carlson at the University of Chicago Department of Physiology and secondarily under Professor L. L. Thurstone in the Department of Psychology. I was exposed early to a social science seminar with Dr. Franz Alexander, who, at that time, was unquestionably the outstanding exponent of psycho-analysis in this country. He was brought to the University of Chicago from Berlin by the Social Science Research Committee. I gained a good deal from the seminar, but much more from participating with the social scientists than from Dr. Alexander himself. Subsequently, very early in my career at the Institute for Juvenile Research, Dr. Alexander presented a paper at the national meeting of the American Orthopsychiatric Association on scientific methods in psychiatry and psycho-analysis, or some such title. He presented three methods: controlled experimentation such as is used in physics; observation of the experiments of nature which he saw as used in medicine and psycho-analysis; and statistical methods which, to him, meant questionnaires. This last type he ridiculed on the basis that it was like asking a person, "Of what are you unconscious?" I criticized the presentation on the basis that the statistical method is not questionnaires; it is a mathematical method of relating probabilities, which are obtained from one of the first two methods, and is, in no sense, a separate method. It had served, for example, in genetics to locate the succession of genes upon the chromosomes of the fruit fly. My criticism was appreciated by a few people at the meeting and some years later resulted in an article ("The Relationship Between Scientific and Pre-scientific Methods in Psychiatry and Mental Hygiene," 1945) which I finally succeeded in having published in *Mental Hygiene* after having it refused by 11 psychiatric journals. Such was the prestige of Dr. Franz Alexander and the psycho-analytic movement at that time.

Smith: *Is writing something with which you have always been involved?*

Jenkins: I wouldn't say I write easily, but it is something I enjoy. I am interested in ideas. I'm interested in the advancement of knowledge and communicating such advancement.

Smith: *Cronbach, from the University of Illinois, states in an article titled "Beyond the Two Disciplines of Scientific Psychology," published in 1975, "Generalizations decay. At one time a conclusion describes an existing situation well, at a later time, it accounts for rather little variance, and ultimately, it is valid only as history." Looking at your work done in the 1940's -- do you still see your conclusions as valid?*

Jenkins: I certainly see them as relatively long lasting. Now, that doesn't mean they are not modified. And, of course, our treatment techniques have been changed to take advantage of the advancement of knowledge.

Smith: *Now I want to switch topics a bit and discuss juvenile justice. We talked briefly about this in a telephone conversation and you stated that the movement to treat the juvenile delinquent similarly to an adult is really a conservative or reactionary approach to delinquency in that it leads to imposing stricter penalties on these youngsters. Up until this time, I thought of such legislation as the Iowa Juvenile Justice Legislation as being liberal legislation.*

Jenkins: In the long run, such legislation is leading to harsher punishment.

Smith: *In an article you wrote on status offenders, you presented data indicating a poorer prognosis of those youngsters as opposed to youngsters who have committed felonies. These results were shocking to me. Was the legislature aware of this data when they were revising the juvenile code?*

Jenkins: This is true at least of the chronic runaway child. Yes, I communicated in writing with many of the legislators.

Smith: *Why did they choose to ignore this?*

Jenkins: Because this is a movement. This movement includes removing the status offenders from the juvenile courts. It was in 1974 that the National Council on Crime and Delinquency took this position. The federal government demanded that states deinstitutionalize status offenders or lose their federal funds. The movement, I suppose, is best exemplified in the Juvenile Justice Standards Project of the American Bar Association. One of the proposals that was discussed as a part of that project was to mandate proportional sentences to juveniles similar to those given to adults.

Smith: *But the Juvenile Justice Bill in Iowa seems to be child-oriented in guaranteeing the right to attorney, the right not to be held for an extended period of time without a hearing, and other measures which seem to be aimed at protecting a child or adolescent.*

Jenkins: These are constitutional guarantees being emphasized so that the juvenile court in juvenile proceedings will be precisely like the criminal court in adult proceedings. As a result, juvenile courts will end up with the same rigidity.

Smith: *How do you react to this professionally?*

Jenkins: If we had the provision in the state for a definite sentence for juveniles, I would quit tomorrow.

Smith: *But under our present system, without definite sentences, isn't tremendous power given the juvenile judge?*

Jenkins: Well, I'm in favor of having a lot of power in the hands of these judges. I trust juvenile judges a lot farther than I trust rigid laws. Besides, there is no way you can make the system equitable in any real sense because of the plea bargaining system.

Smith: *I once read a proposal by McCord and McCord in their text, The Criminal Psychopath, that our legal system actually needs a dualistic approach: the judge determines guilt or innocence and a panel of behavioral scientists, composed of psychiatrists, psychologists, etc., determines the appropriate punishment or sentence as the result of a crime. How do you feel about a system like this for juveniles?*

Jenkins: I would favor it. The present movement is precisely the reverse. The initial juvenile justice law proposed here in Iowa had jury trials as a part of it. But in the true Anglo-Saxon tradition, this would be a trial by peers and all of the juvenile peers would be systematically excluded from jury eligibility on the basis of their age!

Smith: *Carl Rogers in his book titled On Personal Power stated that at one time he thought the professional community was opposed to client-centered psychotherapy on the basis of professional issues. But one day a young man approached him and said that any opposition was really based on politics rather than professional issues. Client-centered therapy was removing the power from the therapist and placing the control with the client! It seems that some people could say your stance on juvenile justice is really a reaction to a removal of your power, as a psychiatrist, in controlling delinquents. How would you respond to this?*

Jenkins: Naturally, I wouldn't agree. I don't think that I am a power-oriented person. Well, I suppose you can always find instances in our field where people are motivated for power or money, but I don't feel that I am in that category. I would prefer that we deal with fewer youngsters in places like Eldora or Mount Pleasant.

Smith: *But let's take the example of a youngster placed in a residential setting. And let's say that this setting is more or less dominated by one psychiatrist who does have a need to control. What kinds of checks and balances would be there to protect the child?*

Jenkins: Well I can only respond for those facilities with which I am associated. At Eldora we have checks and balances that are used in situations such as placement in the detention unit. An individual staff member may initiate this process but such a decision is reviewed by a panel of staff members who decide how long such detention will last. And there is a grievance procedure.

Smith: *Are you saying that you feel fairly comfortable that there are protections, within your profession, to prevent abuse?*

Jenkins: Generally, but we have to look at the issue on a case-by-case and place-by-place basis. We have had a problem in the area of psychoanalysis. When psychoanalysis goes on for 13 years, you wonder what the hell? It has become a way of life for the patient.

Smith: *Are there any standards for psychiatric care for children?*

Jenkins: There are pretty good standards for institutions. Our hospital is approved by the Joint Commission, with the American Hospital Association, the American Medical Association and the American Psychiatric Association.

Smith: *Are there any limitations on the professions of psychiatry or psychology in attempts to change behaviors?*

Jenkins: I think there are some lengths to which society is not allowed to go in controlling behavior.

Smith: *How do you decide this?*

Jenkins: Again, it must be done on an individual basis. Obviously we can get wide agreement on the limitations in changing such things as an individual's religious or political beliefs. The only point at which you have the right to intervene in these areas is when the individual does something to hurt others.

Smith: *But as in the use of aversive conditioning, which is not technologically futuristic but rather already here and illustrated in such books and movies as Anthony Burgess' A Clockwork Orange, who should be able to decide when to use such techniques?*

Jenkins: There has been little decisiveness about this other than the legal decisions which have been applied to hospital settings. Consent of the patient has been taken into account. I don't think we are at a danger point but I think there will be more definitions in this area. In some countries such as Sweden, we are seeing such practices as spanking being prohibited.

Smith: *Do you consider parental behaviors which*

contribute to such child patterns as the "overinhibited personality" as child abuse?

Jenkins: It would have to be extreme.

Smith: *As you are aware, in Public Law 94-142, the socially maladjusted are specifically excluded from special education. Why do you think this occurred?*

Jenkins: My conjecture would be that the federal government does not want to subsidize delinquency.

Smith: *Why?*

Jenkins: It would be viewed as rewarding people for doing bad things. However, these kids are quite frequently educationally retarded and engaged in such behaviors as truancy.

Smith: *How would you describe an educational program for the chronically disruptive youngster? From your view what should be the components of such a program?*

Jenkins: Class size needs to be smaller. You need to know what the ultimate sanction available to the school in controlling behavior is. You need an area where you can remove a child if necessary.

Smith: *Being 75 years old, do you ever worry that professional colleagues might react to your ideas in relationship to your age? Do you deal with any of that or interpret any "age-ism" in the way professionals respond to your views; especially the more controversial ones?*

Jenkins: No. The one exception to this was a matter of situational anger. I was challenging an idea at a meeting at the hospital when a colleague, misunderstanding me, took offense to what I was saying and said I should have retired. Someone reminded him that I am retired. But this was just a matter of an anger situation. I suppose that when people have an objection to someone they use whatever ammunition is available, and clearly my age is ammunition.

Smith: *Do you ever plan to retire?*

Jenkins: Well, I presume so.

Smith: *Your professional activity at this time doesn't seem to what most people would describe as retirement.*

Jenkins: No, it isn't. Well, I presume, unless I die before it, I'll have to retire at some point. Frankly, the things that I notice presently are a lack of endurance in reading and some problems remembering names. I was officially retired at 68 because of my position, however I have been able to go on working.

Conference Information

The Second Annual Midwest Conference on Educational Programs for Emotionally Disabled/Chronically Disruptive Students will be held on Nov. 8 and 9, 1979 at the Scheman Continuing Education Building, Iowa State University in Ames.

The conference is open to institution and public school administrators, support personnel, instructional personnel, parents and other interested persons. The major presenters are: Bruce Balow, University of Minnesota, Minneapolis; Patricia Gallagher, University of Kansas, Kansas City; Nicholas Hobbs, Vanderbilt University, Nashville; and Stewart Robertshaw, University of Wisconsin, LaCrosse.

The conference is sponsored by the Iowa Department of Public Instruction; Iowa Department of Social Services; and the College of Education, Iowa State University. Convention activities include materials exhibits, social functions, small group and major presentations.

Topics for small group sessions will cover the following areas:

Classroom Strategies:

1. Use of Time-Out Procedures
2. Competency-Based Instruction
3. Objective Observation Techniques
4. Teaching Social Interaction Skills
5. Integration Strategies
6. Career/Vocational Education
7. Teaching Self-Control
8. Developing IEPs

Legal & Administrative Issues:

1. The Iowa Juvenile Justice Bill
2. Concerns of Building Principals
3. Current Issues in Iowa School Law
4. Teacher Certification
5. ED/CD Program Development in Rural Areas
6. Alternative Funding Sources
7. P. L. 94-142
8. Alternative Grading Procedures

Support Services Issues:

1. Reintegration of Institutionalized Youth
2. Outpatient Services
3. School Social Work Services
4. Clinical Social Work
5. School Psychological Services
6. Community Based Programming for Adjudicated Youth
7. Generalization for Behavioral Change

Parent Issues & Autism:

1. Music Therapy
2. Child Find Activities
3. Language Development in Autistic Pupils
4. Parents of Handicapped Children: A Panel
5. The Role of Parents in Staffings
6. Parent Support Systems
7. Exemplary Programs for Autistic Pupils

Profiles of the Presenters

Bruce Balow is professor of special education at the University of Minnesota. His professional work includes a wide range of experiences in teaching and psychology. In addition to his teaching experience and university affiliations, he was, for two years, director of the Division of Training Programs, Bureau of Education for the Handicapped, U.S. Office of Education. Dr. Balow has published numerous professional articles dealing with such topics as training teachers of the behaviorally disordered, longitudinal studies of children with learning and behavioral problems and autism.

Patricia Gallagher is professor of special education at the University of Kansas. Dr. Gallagher has had teaching experience in both regular and special education settings. She is presently invoived in the preparation of teachers of the behaviorally disordered. Dr. Gallagher's recent book (1979) is titled *Teaching Students with Behavioral Disorders: Techniques for Classroom Instruction* (Love Publishing, 1979).

Nicholas Hobbs is currently professor of psychology and of preventive medicine at Vanderbilt University in Nashville, Tennessee. Dr. Hobbs has had extensive experience in the field of special education and with emotionally disabled children. He was the principal investigator for Project Re-ED from 1961 to 1968. He was also the project director for the Project on Classification of Exceptional Children of the United States Department of Health, Education, and Welfare which culminated in the publication, *The Futures of Children: Categories, Labels and their Consequences*, 1974.

Stewart Robertshaw is currently on the staff of the University of Wisconsin-LaCrosse and also maintains a part-time legal practice. Dr. Robertshaw holds both a Ph.D. in special education (behavioral disorders) from the University of Kansas and a law degree from the University of Wisconsin. He is also involved with several legal advisory committees and is a member of the Legislative Committee of the Council for Children with Behavioral Disorders.

Lodging:

Participants will need to arrange their own lodging. Listed for your convenience are a few of the hotels/motels in the Ames area.

Gateway Center Elwood Drive & H-way 30 515/292-8600 Single: $29.00 Double: $35.00	Ramada Inn 1206 South Duff Ave. 515/232-3410 Single: $22.95 Double: $28.95
Memorial Union I.S.U. Campus 515/292-1111 Single: $15.75-$17.75 Double: $22.00	Holiday Inn 316 South Duff 1-800-238-8000 Single: $25.00 Double: $30.00

Registration Information:

Registration will be open on both days (November 8 & 9, 1979) at *7:45 a.m.* A registration fee of $20.00 to cover the cost of luncheon banquets, room rental, and coffee breaks must be paid at the time of registration. Checks should be made out to Iowa State University.

E.D./C.D. Conference
November 8 & 9, 1979
Conference Registration Form

Please return with registration fee by October 22, 1979 to:
E.C./C.D. CONFERENCE
Iowa State Conference Center
% Tom McCormick
Scheman Continuing Education Building
Iowa State University Ames, Iowa 50010

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